

1-18-07

Disability Funding

My name is David Ericson. My daughter, Kelly, has cerebral palsy. Kelly is 19 yrs. old and lives at home. My wife Lenor and I moved the family to Montana 7 yrs ago. The services Kelly has received here have been crucial. Kelly is considered an intensive case with an extensive medical history.

Kelly requires a lot of care and needs a lot of durable medical equipment and medications. She has been on tube feedings for over two years and will need them indefinitely. They alone cost approximately \$1000/month. Her diapers and liners cost about \$100/month. Wheelchairs run over \$2500 every 3-5 yrs. Her orthotic appliances that she wears on her ankles cost over \$1800. When she was growing, these were replaced at least annually. Medications have varied over the years but they have routinely cost over \$200 monthly. Respite care has been invaluable to our family's well being. Without it, our family would be in crisis. The expense for respite runs around \$8/hr. This also varies depending on the length of time that the respite lasts. Case management personnel have been integral in setting up these services.

As you can see, Kelly's expenses add up quickly. Without these services we would be in financial trouble. My wife only works a few hours a week because of her need to be home for Kelly. I have been the sole bread winner for many years and we've always had to be careful financially. Other expenses include the need for a full sized van with a lift and we've always had to purchase ranch style homes. Ranches are always more expensive per square foot.

I am a medical professional and make a good living. Even so, we are reliant on Kelly's services for support. If a professional man, with a wife at home, struggles under the psychological and financial strain of caring for a disabled child, how much more difficult would it be for a single parent making an hourly wage?

Support for families with disabled children promotes keeping the family together. (The divorce rate among disabled families exceeds 80%). Also, a child in the home is less expensive than the cost of tending to that child in an institutional setting. Support for families also extends into the community. Integrating young adults into the community and workforce is crucial. Currently, there is a 5-10 yr waiting list for an intensive group home. Kelly is out of school because of budgetary limitations and is unable to start at Reach because of the lack of funding.

I have frequently read about the state's concerns about attracting businesses and professionals to Montana. It is important to consider that without support services for families, many upwardly mobile professionals will seek out an environment that is more supportive elsewhere.

Please continue to fund our programs and there's more to be done!

Thank you for listening.

West Mont

January 17, 2007

The 60th Montana
Legislative Session
The Joint Health and Human
Services Appropriation Sub-Committee
Edith Clark, Chair Person

Dear Representative Clark and Committee Members:


West Mont has been providing residential, vocational and employment opportunities for individuals with developmental and other disabilities in the Helena area, since the early 1980's. Many of the individuals that we provide services to originally lived at the Montana Developmental Center and have intensive behavioral problems and/or are medically fragile.

We have not typically become too involved with the political process or been very outspoken regarding issues that may have an impact on those we serve. Over the last several years, however, we have become increasingly more troubled about the lack of funding and support for individuals with developmental disabilities and the devastating impact it is having on the services we provide. Agencies, like West Mont, have fixed incomes and typically rely entirely on Federal and State dollars to fund our programs. As you know, throughout our state the unemployment rate has reached an all time low. That, coupled with the below living/competitive level wages we are able to pay, makes recruitment and retention of qualified employees to care for individuals who cannot care for themselves, extremely difficult. In addition, we are very concerned that staffing shortages may eventually put the individuals with disabilities we serve at risk.

The Governor's budget request for \$18 million funding increase over the next biennium (of which nearly 70% is Federal dollars) is greatly appreciated, but we respectfully urge the committee to fund community disability programs at the **\$30 million** biennium increase level requested by DPHHS (about half for FY 2008 and half for FY2009). In addition, we support the \$11.4 million earmarked in the Governor's budget for people needing services who are currently on waiting lists. This \$11.4 million is in addition to the \$30 million requested for community based services.

Thank you for taking the time to consider this written testimony. If you need any additional information, please contact either one of us at 447-3100.

Most Sincerely,


Kristin Bakula
Co-President


Richard Saravalli
Co-President